

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	76534	08/13/29
O.I.P.E. CLASSIFIER		25	08-17-29
FOR QUALITY REVIEW		608714	5-25-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim:	Date
Final	Original
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
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